

RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP: 3771

32692

Customer Number

Patent

Case No.: 48317US030

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: JAPUNTICH, DANIEL A.

Application No.: 09/678580

Confirmation No.: 7366

Filed: October 3, 2000

Title: FIBROUS FILTRATION FACE MASK HAVING A NEW
UNIDIRECTIONAL FLUID VALVE

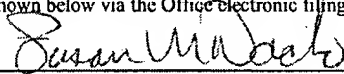
AMENDMENT AND RESPONSE UNDER 37 CFR § 1.116
AND
REQUEST FOR EXTENSION OF TIME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF TRANSMISSION [37 CFR § 1.8(a)]

I hereby certify that this correspondence is being transmitted to United States Patent and Trademark Office on the date shown below via the Office electronic filing system.

July 7, 2008
Date


Signed by: Susan M. Dacko

Dear Sir:

In response to the Office Action mailed November 14, 2007, please amend this application as set forth below.

Fees

- ☒ Any required fee will be made at the time of submission via EFS-Web. In the event fees are not or cannot be paid at the time of EFS-Web submission, please charge any fees under 37 CFR § 1.17 which may be required to Deposit Account No. 13-3723.
- ☒ Please charge any additional fees associated with the prosecution of this application to Deposit Account No. 13-3723. This authorization includes the fee for any necessary extension of time under 37 CFR § 1.136(a). To the extent any such extension should become necessary, it is hereby requested.
- ☒ Please credit any overpayment to the same deposit account.

Additional claim fees for this amendment are computed as follows:

Claims As Amended							
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For		(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	53	Minus	**	52	1	x \$50.00	\$50.00
Independent Claims	2	Minus	***	3	0	x \$210.00	\$0.00
Additional fee for filing one or more multiple dependent claims, if no such fee has been paid						\$370.00	
Total Additional Fee For This Amendment							\$50.00
** If the "Highest No. Previously Paid For" is less than 20, insert "20" in next space.							
*** If the "Highest No. previously Paid For" is less than 3, insert "3" in next space.							